



City of San Ramon
Engineering Services
2401 Crow Canyon Road
San Ramon, CA 94583
Ph (925) 973-2670
Fx (925) 838-3937

PAYMENT AUTHORIZATION

Request for Plans & Specs

Project Information

Name of Job: _____

CIP No.: _____ No. of Plans & Specs: _____

Shipping Method

Please choose one:

- ☐ Please send using **my** UPS /Fed-Ex (*circle one*) account, # _____
- ☐ Please send using the City's preferred shipping method*

**NOTE: Extra charges apply. See the "Notice to Contractors" for specific fees.*

Plan Holder Information

Company Name: _____

Physical Address (*no P.O. Boxes*): _____

City, State and Zip Code: _____

Phone #: _____ Fax #: _____

Payment Information

Charge to my ☐ MasterCard ☐ Visa

Print name as it appears on card _____

Print name of business _____

Card No.

Expiration Date _____ Amount \$ _____

Authorized Signature: _____